| | | | | | | | | Application or Docket Number | | | | | | |
|--|--|---|--------------------|-------------------------------|--------------|------------------|-------------------|------------------------------|-------------------------|----------|---------------------|------------------------|--|--|
| PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 | | | | | | | | | | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | SMALL ENTITY TYPE | | | OR | OTHER SMALL | | | |
| TOTAL CLAIMS | | | 13 | | | | RAT | ΓE | FEE | 1 | RATE | FEE | | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | BASIC | FEE | 355.00 | OR | BASIC FEE | 710.00 | | |
| TOTAL CHARGEABLE CLAIMS | | | 2 minus 20= | | . / | | X\$ 9= | | | OR | X\$18= | | | |
| INDEPENDENT CLAIMS | | |) minus 3 = | | * / | | X40= | | | OR | X80= | | | |
| ML | ILTIPLE DEPEN | NDENT CLAIM P | RESENT | | | | +135= | | | OR | +270= | | | |
| * If the difference in column 1 is less than zero, enter "0" in colum | | | | | | column 2 | TOT | | ₹55.∞ | OR | TOTAL | | | |
| CLAIMS AS AMENDED - PART II | | | | | | | | , | 335 | Jon | OTHER | THAN | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | LL | ENTITY | OR | SMALL | | | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | RAT | Έ | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | * | Minus | ** | | = | X\$ 9 | 9= | | OR | X\$18= | | | |
| | Independent | * | Minus | *** | | = | X40 |)= | | OR | X80= | | | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | +135 | | | OR | +270= | | | |
| | | | | | | | TC | TAL | | | TOTAL | <u> </u> | | |
| | (Column 1) (Column 2) (Column 3) | | | | | | | | ADDIT. FEEOH ADDIT. FEE | | | | | |
| AMENDMENT B | | CLAIMS | | HIGH | | | | | ADDI- | | , | ADDI- | | |
| | 0. | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | DUSLY | PRESENT EXTRA | RAT | E | TIONAL FEE | | RATE | TIONAL FEE | | |
| | Total | . 35 | Minus | ** | | = | X\$ 9 |)= | | OR | X\$18= | | | |
| | Independent | NITATION OF MI | Minus | *** | CLAINA | = | X40 | = | | OR | X80= | | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | +135 | 5= | | OR | +270= | | | |
| | | | | | | | | TAL | | | TOTAL ADDIT. FEE | | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | • | ADDIT. FEET | | | |
| AMENDMENT C | | CLAIMS REMAINING | | HIGH NUM | EST | PRESENT | | | ADDI- | | | ADDI- | | |
| | | AFTER AMENDMENT | | PREVIO | DUSLY | EXTRA | RAT | Ε | TIONAL FEE | | RATE | TIONAL FEE | | |
| | Total | . 36 | Minus | ** 6 | 20 | = /6 | X\$ 9 |)= | | OR | X\$18= | | | |
| | Independent | NTATION OF MI | Minus | *** | 5 CLAIM | = 5 | X40 | = | | OR | X80= | | | |
| | FINOT FRESE | INTATION OF WI | OLTIPLE DEF | ENDENI | CLAIM | | +135 | = | | OR | +270= | | | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | TAL | | | TOTAL | | | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found. | | | | | | | | | | | ADDIT. FEE | | | |
| | me rignest Nur | iber Previously Pai | iu For" (lotal oi | inaependi | eni) is the | nignest number | iouna in th | e app | propriate box | t in col | umn 1. | | | |